The term "still birth" applies to a child born after the 28th week of gestation as dead or apparently dead and not called back to life.

Report of Births in the Municipality of Honnali during the month of.....192 .

Date and hour of birth	Caste	Born alive	Still born	Sex		Where born, locality, name of street, etc.	Door No.	Father's name and occupation	Date on which the notice was sent	Remarks
				Male	Female					
1	2	3	4	5	6	7	8	9	10	11

N.B.—This report must be received within one week next after the date of birth.

Informant's name and address.

Report of Deaths in the Municipality of Honnali during the month of.....192 .

Name and surname of the deceased in Kanarese	Occupation	Residence	Where death occurred	Door No.	Age			Sex	Caste	Date of death	Date of registry	Cause of death*	Name of doctor, hakim or vaidya who last treated the deceased	Remarks
					Years	Months	Days							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

* If the cause is unknown, mention the symptoms with which the deceased was affected, *i.e.*, fever, cough, vomitings, diarrhœa and the duration of last illness.

N.B.—This report should be despatched within 24 (twenty-four) hours after the occurrence of death.

Register of Births in the Municipality of Honnali during the month of.....192 .

Serial No.	Date of registration	Father's name	Mother's name	Residence	Father's occupation	Caste	Sex		Date of birth	Name of the child, if any	Name of the informant	Residence of the informant	Signature or mark of the informant	Signature of the Sub-Registrar	Remarks
							Male	Female							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

Register of Deaths in the Municipality of Honnali during the month of.....192 .

Serial No.	Date of registration	Name of deceased	Father's name	Residence at the time of death	Age	Sex		Caste	Occupation	Date of death	Cause of death	Name of informant	Residence of the informant	Signature or mark of the informant	Signature of the Sub-Registrar	Remarks
						Male	Female									
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17